

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/552629

FILING DATE

07 OCT 2005

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1			1			
2				1		
3				1		
4				1		
5				1		
6				1		
7				1		
8				1		
9				1		
10				1		
11				1		
12				1		
13				1		
14				1		
15				1		
16				1		
17				1		
18				1		
19				1		
20				1		
21				1		
22				1		
23			1			
24				1		
25				1		
26				1		
27				1		
28				1		
29				1		
30				1		
31				1		
32				1		
33				1		
34				1		
35				1		
36				1		
37				1		
38				1		
39				1		
40				1		
41				1		
42				1		
43				1		
44			1			
45				1		
46				1		
47				1		
48				1		
49				1		
50				1		
TOTAL IND.		↓	3	↓		↓
TOTAL DEP.		←	71	←		←
TOTAL CLAIMS			74			

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51				2		
52				2		
53				2		
54				2		
55				2		
56				2		
57				2		
58				2		
59				2		
60				2		
61			1			
62				1		
63				2		
64				1		
65			1			
66				1		
67				2		
68				1		
69				1		
70						
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94						
95						
96						
97						
98						
99						
100						
TOTAL IND.		↓	2	↓		↓
TOTAL DEP.		←	28	←		←
TOTAL CLAIMS			30			